

FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

RECEIVED  
2015 FEB 26 AM 11:54  
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Office Use Only  
12 FEB 26

1. NAME OF  
COMMITTEE (in full)



(Check if name  
is changed)

Example: If typing, type  
over the lines.

12 FEB 26

ELEVENTH CONGRESSIONAL DISTRICT OF MICHIGAN  
DEMOCRATIC PARTY

ADDRESS (number and street)

502 WEST MAIN STREET



(Check if address  
is changed)

NORTHVILLE

CITY ▲

MI

STATE ▲

48167-1529

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS



(Check if address  
is changed)

CHUCK-KEYS@HOTMAIL.COM

Optional Second E-Mail Address

ERIVERA1446@COMCAST.NET

COMMITTEE'S WEB PAGE ADDRESS (URL)



(Check if address  
is changed)

WWW.11THDISTRICTDEMS.COM

2. DATE

04 / 02 / 2013

3. FEC IDENTIFICATION NUMBER ►

C00544833

4. IS THIS STATEMENT



NEW (N)

OR



AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

ETHYL M. RIVERA

Signature of Treasurer

*Ethyl M. Rivera*

Date

02 / 20 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109.  
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office  
Use  
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For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 06/2012)



Write or Type Committee Name

## 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

## 7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

TREASURER

Mailing Address

Title or Position

CITY

STATE

ZIP CODE

Telephone number

## 8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name  
of Treasurer

ETHYL M RIVERA

Mailing Address

70 PINE TREE RIDGE DRIVE

UNIT 2

WATERFORD

CITY

STATE

ZIP CODE

Title or Position

TREASURER

Telephone number

248-464-2689

Full Name of  
Designated  
Agent

CHUCK KEYS

Mailing Address

502 WEST MAIN STREET

NORTHVILLE

CITY

MI

STATE

48167-1529

ZIP CODE

Title or Position

CHAIR

Telephone number

248-231-5205

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

W0740 : 044 : W0744



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M. Rivera  
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54  
PREPARER  
(8/2013)

2/26/2015  
DATE PREPARED

15001-140-0764